Fill in this information to identify your c	ase:	
United States Bankruptcy Court for the: DISTRICT OF HAWAII		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example,	Joni First Name Akiko Konishi	First Name
	your driver's license or passport).	Middle Name	Middle Name
	Bring your picture identification to your meeting	Matsuzaki Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	First Name	First Name
	Include your married or	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of your Social Security number or federal	xxx - xx - <u>5</u> <u>0</u> <u>7</u> <u>3</u> OR	xxx - xx
	Individual Taxpayer Identification number (ITIN)	9xx - xx	9xx - xx
4.	Any business names and Employer Identification Numbers	✓ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
	(EIN) you have used in the last 8 years	Business name	Business name
	Include trade names and doing business as names	Business name	Business name
	doing business as names	Business name	Business name

Deb	otor 1	Joni First Name	Akiko Konishi	Matsuzaki Last Name	Case nu	ımber (if known)
		riistivanie	About Debtor		Ab	out Debtor 2 (Spouse Only in a Joint Case):
			-		7.0	_
First Name Middle Name About De EIN EIN 5. Where you live		EIN -		EIN		
			<u> </u>			
5.	Where	you live	LIIV			Debtor 2 lives at a different address:
			1211 9th Av	enue		
					Nur	mber Street
			-			
			Honolulu City	HI 96816 State ZIP Code	City	State ZIP Code
			Honolulu	State 2 5645	J.,	
			County		Cou	unty
				g address is different from		Debtor 2's mailing address is different
				e, fill it in here. Note that the dany notices to you at this		m yours, fill it in here. Note that the court send any notices to you at this mailing
			mailing addre	SS.	ado	dress.
			Po Box 213	5		
			Number Stree	et	Nur	mber Street
			P.O. Box		— <u>P.C</u>). Box
			Honolulu	HI 96805		
			City	State ZIP Code	City	State ZIP Code
6.		ou are choosing strict to file for	Check one:		Ch	eck one:
	bankru			last 180 days before filing this I have lived in this district longer		Over the last 180 days before filing this petition, I have lived in this district longer
				ny other district.	51	than in any other district.
				nother reason. Explain. U.S.C. § 1408.)		I have another reason. Explain. (See 28 U.S.C. § 1408.)
		_				
Р	art 2:	Tell the Cour	t About Your Bar	kruptcy Case		
7.		napter of the uptcy Code you				equired by 11 U.S.C. § 342(b) for Individuals Filing and check the appropriate box.
		oosing to file	Chapter 7			
			☐ Chapter 1	I		
			☐ Chapter 12			
			☐ Chapter 13			
			☐ 5ap.51 10			

Debtor 1	Joni	Akiko Konishi	Matsuzaki	Case number (if kno	wn)
	First Name	Middle Name	Last Name	•	
8. Hov	v you will pay the fee	court for n	nore details about how yo ash, cashier's check, or r	u may pay. Typically, if you ar	with the clerk's office in your local e paying the fee yourself, you may a submitting your payment on your e-printed address.
			•	nts. If you choose this option, n Installments (Official Form 10	sign and attach the Application for 03A).
		By law, a j than 150% fee in insta	udge may, but is not requ s of the official poverty lin allments). If you choose	uired to, waive your fee, and make that applies to your family size.	nly if you are filing for Chapter 7. ay do so only if your income is less ze and you are unable to pay the a Application to Have the Chapter 7 n.
). Hav	e you filed for	√ No			
	kruptcy within the 8 years?	— ☐ Yes.			
	, o , o	District		When	Case number
				MM / DD / Y	
		District		When MM / DD / Y	Case number
		District		When	Case number
0. Are	any bankruptcy	√ No		MM / DD / Y	YYY
cas	es pending or being				
	d by a spouse who is filing this case with	_		Dalat	inantia ta wa
-	, or by a business	Debtor			ionship to you
•	tner, or by an iate?	District		When MM / DD / Y	Case number, if known
		Debtor		Polat	ionship to you
		District		When MM / DD / Y	Case number, YYY if known
	you rent your dence?	☑ Yes. Has	to line 12. s your landlord obtained a dence?	an eviction judgment against yc	ou and do you want to stay in your
			No. Go to line 12. Yes. Fill out Initial State and file it with this bank	•	nent Against You (Form 101A)

Deb	tor 1	Joni	Akiko			suzaki	Cas	e number (it	f known)		
		First Name	Middle N		Last N						
P	art 3:	Report About A	Any Bu	ısines	ses You	Own as a	Sole Proprieto	or			
12.	•	u a sole proprietor full- or part-time ss?	☑		o to Part 4. Name and lo	ocation of bus	siness				
	busines individu separat	proprietorship is a ss you operate as an ial, and is not a e legal entity such as ration, partnership, or			Name of busin	ness, if any					
	sole pro	ave more than one oprietorship, use a e sheet and attach it petition.			Health Single Stockt	Care Busine Asset Real I proker (as de	ess (as defined in 1 Estate (as defined fined in 11 U.S.C. (as defined in 11 U.S.C.)	I1 U.S.C. § in 11 U.S.C § 101(53A))	. § 101(51B))	ZIP Cod	de
13.	Chapte Bankru	u filing under r 11 of the ptcy Code and I a <i>small business</i>	can mos	set app st recen	<i>propriate dea</i> t balance sh	adlines. If you eet, stateme	ne court must know ou indicate that you ent of operations, ca exist, follow the pro	are a small	l business deb tement, and fe	otor, you r ederal inc	must attach your come tax return
				No.	I am not filir	ng under Cha	apter 11.				
		efinition of small as debtor, see		No.	I am filing u the Bankrup	•	r 11, but I am NOT	a small bus	siness debtor a	according	g to the definition in
	11 U.S.	C. § 101(51D).		Yes.	I am filing u Bankruptcy	•	r 11 and I am a sm	nall business	s debtor accor	ding to th	e definition in the
P	art 4:	Report If You C	Own or	Have	Any Haz	ardous Pr	operty or Any	Property	That Need	ls Imme	ediate Attention
14.	propert alleged immine	own or have any ty that poses or is to pose a threat of ent and identifiable to public health or		No Yes.	What is the	hazard?					
	safety?	Or do you own operty that needs tate attention?			If immediate	e attention is	needed, why is it r	needed?			
	perisha livestoc	ample, do you own ble goods, or ok that must be fed, or ng that needs urgent ?			Where is th		Number Street				
						ō	City		<u> </u>	state	ZIP Code

Debtor 1

Part 5:

Joni Akiko Konishi Matsuzaki

You must check one:

First Name

Middle Name Last Name

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. About Debtor 1:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a

certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

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☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1	Joni	Akiko Konishi	Matsuzaki	Case number (if known)	

First Name Middle Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do you 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) have? as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. П Yes. Go to line 17. $\overline{\mathbf{A}}$ 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. State the type of debts you owe that are not consumer or business debts. 17. Are you filing under Chapter 7? I am not filing under Chapter 7. Go to line 18. No. Do you estimate that after \square I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and any exempt property is administrative expenses are paid that funds will be available to distribute to unsecured creditors? excluded and **☑** No administrative expenses are paid that funds will be Yes П available for distribution to unsecured creditors? 18. How many creditors do 1-49 1,000-5,000 25,001-50,000 you estimate that you 50-99 5,001-10,000 50,001-100,000 owe? 100-199 10,001-25,000 More than 100,000 200-999 19. How much do you \$0-\$50,000 \$1,000,001-\$10 million П \$500,000,001-\$1 billion П П estimate your assets to \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion be worth? \$100,001-\$500,000 \$50,000,001-\$100 million П \$10,000,000,001-\$50 billion \square П

estimate your liabilities to be?

20. How much do you

Debtor 1	Joni	Akiko Konishi	Matsuzaki	Case number (if known)	
	First Name	Middle Name	Last Name		

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Joni Akiko Konishi Matsuzaki	X
Joni Akiko Konishi Matsuzaki, Debtor 1	Signature of Debtor 2
Executed on 12/16/2016	Executed on
MM / DD / YYYY	MM / DD / YYYY

Debtor 1	Joni	Akiko Konishi	Matsuzaki	Case number (if known)
	First Name	Middle Name	Last Name	·	
represente	not represented by ey, you do not need	eligibility to proc relief available the debtor(s) th	ceed under Chapter 7, 1 under each chapter for w e notice required by 11 L	n this petition, declare that I have in this petition, declare that I have in the state of the person is eligible. I also J.S.C. § 342(b) and, in a case in which inquiry that the information in the	es Code, and have explained the certify that I have delivered to which § 707(b)(4)(D) applies,
		X /s/ Blake G Signature of	Goodman Attorney for Debtor		12/16/2016 MM / DD / YYYY
		Blake Goo			
		Printed nam			
		Blake Goo Firm Name	odman, PC		
			4*004 Moll #4707		
		Number	Street Mall, #1727		
		Honolulu		HI	96813
		City		State	ZIP Code
		Contact pho	ne (808) 528-4274	Email address goodm	an@hawaii.rr.com
		7436			
		Bar number		State	-

UNITED STATES BANKRUPTCY COURT DISTRICT OF HAWAII HONOLULU DIVISION

In	re Joni Akiko Konishi Matsuzaki	Case No.	
		Chapter	7
	DISCLOSURE OF COMPENSATION OF ATTORI	NEY FOR	DEBTOR
1.	. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the a that compensation paid to me within one year before the filing of the petition in bar services rendered or to be rendered on behalf of the debtor(s) in contemplation of is as follows:	nkruptcy, or ac	greed to be paid to me, for
	For legal services, I have agreed to accept	\$1,4	465.00
	Prior to the filing of this statement I have received	\$1,4	465.00
	Balance Due		\$0.00
2.	. The source of the compensation paid to me was:		
	☑ Debtor ☐ Other (specify)		
3.	. The source of compensation to be paid to me is:		
	✓ Debtor Other (specify)		
4.	I have not agreed to share the above-disclosed compensation with any other associates of my law firm.	person unless	s they are members and
	☐ I have agreed to share the above-disclosed compensation with another personassociates of my law firm. A copy of the agreement, together with a list of the compensation, is attached.		
5.	. In return for the above-disclosed fee, I have agreed to render legal service for all a	aspects of the	bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in bankruptcy;	n determining	whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements of affairs and plan	which may be	e required;
	c. Representation of the debtor at the meeting of creditors and confirmation heari	ng, and any ad	diourned hearings thereof:

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation in Adversary Proceedings, Preparation of Amendments to Schedules, and Preparation and Representation of Reaffirmation Agreements.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

 12/16/2016
 /s/ Blake Goodman

 Date
 Blake Goodman

Blake Goodman Blake Goodman, PC 900 Fort Street Mall, #1727 Honolulu, Hawaii 96813

Phone: (808) 528-4274 / Fax: (808) 536-1008

Bar No. 7436

Debtor 1	<u>Joni</u>	dentify your case: Akiko Konishi	Matsuzaki	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court fo	or the: DISTRICT OF H	AWAII	
Case number (if known)				☐ Check if this is an amended filing
Official Form	106Sum			

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: **Summarize Your Assets**

		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$221,100.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$221,100.00
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
•	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	Amount you owe
		\$3,427.00
	2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$3,427.00 \$0.00

Part 3: **Summarize Your Income and Expenses**

Schedule I: Your Income (Official Form 106I) \$4,282.98 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) \$4,280.00 Copy your monthly expenses from line 22c of Schedule J.....

Debtor 1		Joni	Akiko Konishi Matsuzaki		Case number (if known)		
		First Name	Middle Name	Last Name			
Pa	art 4:	Answer Th	ese Questions for A	Administrative an	d Statistical Records		
6.	Are y	ou filing for bank	ruptcy under Chapters 7	7, 11, or 13?			
	ш	No. You have noth Yes	ing to report on this part o	of the form. Check this	s box and submit this form to the court with you	ır other schedules.	
7.	What	kind of debt do y	ou have?				
		•	•		those "incurred by an individual primarily for a 9g for statistical purposes. 28 U.S.C. § 159.	personal,	
			t primarily consumer de rt with your other schedul		g to report on this part of the form. Check this	box and submit	
8.			Your Current Monthly In the 11; OR, Form 122B Lir		al current monthly income from -1 Line 14.	\$6,837.97	

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations. (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$5,426.00
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00
9g. Total. Add lines 9a through 9f.	\$5,426.00

Fill in this in	<u>fo</u> rmation to ic	dentify your case a	and this filing:		
Debtor 1	<u>Joni</u>	Akiko Konishi	Matsuzaki		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing	j) First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for	the: DISTRICT OF H	AWAII		
Case number				☐ Check	if this is an
(if known)				_	led filing
Official Forn	n 106A/B				
Schedule A	VB: Property	/			12/15
filing together, b sheet to this form	oth are equally res m. On the top of a	sponsible for supplying ny additional pages, w	as complete and accurate as g correct information. If more rrite your name and case number, Land, or Other Real Es	espace is needed, attach a ber (if known). Answer eve	separate ry question.
✓ No. Go ☐ Yes. W	to Part 2. here is the property	y?	n any residence, building, land f your entries from Part 1, incl		
	-		e that number here		\$0.00
Part 2: De	escribe Your Vo	ehicles			
-		-	any vehicles, whether they are lso report it on Schedule G: Exe	_	•
3. Cars, vans,	trucks, tractors, s	port utility vehicles, m	otorcycles		
□ No ☑ Yes					
3.1.			n interest in the property?	Do not deduct secured cla	•
Make:	Toyota	Check one.	1 only	amount of any secured cla Creditors Who Have Claim	
Model:	Yaris	Debtor	•	Current value of the	Current value of the
Year: Approximate mile	2012	—	1 and Debtor 2 only	entire property?	portion you own?
Other information	-	At least	t one of the debtors and another	\$5,775.00	\$5,775.00
	aris (approx. 425		if this is community property structions)		
•	•	•	ecreational vehicles, other vehicles, other vehicles, rowmobiles, r	•	
✓ No ☐ Yes					
	-		f your entries from Part 2, incl	uding any	\$5,775.00

Debtor 1	Joni	Akiko Konishi	Matsuzaki	Case number (if known)
Jeptor 1	JOH	AKIKO KONISHI	Maisuzaki	Case number (if known)

First Name Middle Name Last Name

Pa	art 3: Describe Your Personal and Household Items	
Do y	you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware	
	✓ No Yes. Describe	
7.	Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners music collections; electronic devices including cell phones, cameras, media players, games	;
	✓ No ☐ Yes. Describe	
8.	Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	✓ No ☐ Yes. Describe	
9.	Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	✓ No Yes. Describe	
10.	Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	✓ No Yes. Describe	
11.	Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	☐ No ☑ Yes. Describe Clothing	\$200.00
12.	Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gold, silver	gems,
	□ No ☑ Yes. Describe Jewelry	\$200.00
13.	Non-farm animals Examples: Dogs, cats, birds, horses	
	✓ No ☐ Yes. Describe	
14.	Any other personal and household items you did not already list, including any health aids you did not list	
	✓ No Yes. Give specific information	
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have	\$400.00
	attached for Part 3. Write the number here	/

Debtor 1 Akiko Konishi Matsuzaki Case number (if known)

Joni First Name Middle Name Last Name

P	art 4	! :	Describe Yo	our Financial A	ssets	
Do you own		own o	or have any leg	Current value of the portion you own? Do not deduct secured claims or exemptions.		
16.	Cas Exa		s: Money you ha	ave in your wallet, ir	n your home, in a safe deposit box, and on hand when you file your	
		No Yes			Cash:	\$50.00
17.	-	osits	of money s: Checking, sa	vings, or other finan uses, and other sim	icial accounts; certificates of deposit; shares in credit unions, illar institutions. If you have multiple accounts with the same	
		No Yes		. Institu	tion name:	
	V	17.1		ccount: Chec	king Account ral Pacific Bank	\$1,300.00
		17.2	. Checking a		king Account i Government Employees Fcu	\$100.00
		17.3	. Checking a		ngs Account i Government Employees Fcu	\$500.00
		17.4	. Checking a		king Account aiian Tel Employees Fcu	\$200.00
18.	Exa	mple. No	s: Bond funds, i	r publicly traded so nvestment accounts . Institution or iss	s with brokerage firms, money market accounts	
19.	Nor	n-pub	licly traded sto		incorporated and unincorporated businesses, including	
		No Yes. inform	Give specific nation about		% of ownership:	
20.	Neg	gotiab	le instruments ir	nclude personal che	ner negotiable and non-negotiable instruments cks, cashiers' checks, promissory notes, and money orders. annot transfer to someone by signing or delivering them.	
		infor	Give specific nation about	. Issuer name:		
				Savings Bond At Residence	ds	\$3,500.00
21.			ent or pension a s: Interests in IF profit-sharing	RA, ERISA, Keogh,	401(k), 403(b), thrift savings accounts, or other pension or	
		No Yes	List each			
	I ▼		unt separately.	Type of account:	Institution name:	
				401(k) or similar p	olan: 401(k) or similar plan	\$200,000.00
				Pension plan:	Pension plan	\$3,000.00

Deb	tor 1	Joni	Akiko Konishi	Matsuzaki	Case number (if known)				
		First Name	Middle Name	Last Name					
22.	Your s Exam	Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications ompanies, or others							
	□ N	0							
	☑ Ye	es	Ins	stitution name or individu	al:				
		Security dep	osit on rental unit: Se	curity deposit on rer	ntal unit	\$1,500.00			
23.	Annui ✓ N	•	specific periodic payı	ment of money to you, eit	ther for life or for a number of years)				
		es	Issuer name and des	cription:					
24.		ests in an education I S.C. §§ 530(b)(1), 529		a qualified ABLE progr	am, or under a qualified state tuition p	orogram.			
	✓ No		Institution name and	description. Separately	file the records of any interests. 11 U.S.	C. § 521(c)			
25.		s, equitable or future rs exercisable for yo		(other than anything li	isted in line 1), and rights or				
		o es. Give specific formation about them							
26.				, and other intellectual ceeds from royalties and					
	_	o es. Give specific formation about them							
27.		ses, franchises, and ples: Building permits			noldings, liquor licenses, professional lic	enses			
	☑ N	0							
		es. Give specific formation about them							
Mor	ney or p	property owed to you	1?			Current value of the portion you own? Do not deduct secured claims or exemptions.			
28.	Tax re	efunds owed to you							
	□ N	0							
	☑ Ye			015 Fed Refund. Amt	:: \$3,000.00 Fede	ral: \$3,000.00			
	yc	ou already filed the ret	urns State: 201	State Refund. Amt:	\$1,000.00 State	\$1,000.00			
	aı	nd the tax years			Local	: \$0.00			
29.		y support ples: Past due or lum	p sum alimony, spous	al support, child support,	maintenance, divorce settlement, prope	erty settlement			
	✓ No	o es. Give specific infor	rmation		Alimony:	\$0.00			
					Maintenance:	\$0.00			
					Support:	\$0.00			
					Divorce settleme	ent: \$0.00			
					Property settleme	ent: \$0.00			

Deb		Akiko Konishi	Matsuzaki	Case number (if known)	
	First Name	Middle Name	Last Name		
30.		•	•	nefits, sick pay, vacation pay, workers' made to someone else	
	No✓ Yes. Give specific in	nformation Refund of	child support pay	ment from Norman Matsuzaki	\$775.00
31.	Interests in insurance p Examples: Health, disab		alth savings account	(HSA); credit, homeowner's, or renter's inst	urance
	No ✓ Yes. Name the insurcompany of each poland list its value	licy		Beneficiary:	Surrender or refund value:
			surance Policy	201010101	\$0.00
32.	Any interest in property If you are the beneficiary entitled to receive proper	of a living trust, expect p	roceeds from a life in	ed nsurance policy, or are currently	
	✓ No ☐ Yes. Give specific in	nformation			
33.	Claims against third par Examples: Accidents, er			uit or made a demand for payment ts to sue	
	✓ No✓ Yes. Describe each	claim			
34.	Other contingent and unrights to set off claims	nliquidated claims of ev	ery nature, includir	ng counterclaims of the debtor and	
	✓ No ☐ Yes. Describe each	claim			
35.	Any financial assets yo	u did not already list			
	✓ No Yes. Give specific in	nformation			
36.				y entries for pages you have	\$214,925.00
Pa	art 5: Describe Any	Business-Related	Property You O	wn or Have an Interest In. List ar	ny real estate in Part 1.
37.	Do you own or have any	y legal or equitable inte	rest in any busines	s-related property?	
	No. Go to Part 6. Yes. Go to line 38.				
					Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or	commissions you alrea	ady earned		Gains of exemptions.
	✓ No Yes. Describe				
39.			, modems, printers, o	copiers, fax machines, rugs, telephones,	
	✓ No Yes. Describe				

Deb		Joni	Akiko Konishi	Matsuzaki	Case number (if known)	
40		First Name	Middle Name	Last Name	and a foreign too to	
40.	Machine	ery, fixtures, eq	uipment, supplies you ι	ise in business, and to	bols of your trade	
	✓ No ☐ Yes	. Describe				
41.	Invento	ry				
	☑ No □ Yes	. Describe				
42.	Interest	s in partnership	s or joint ventures			
	☑ No □ Yes	. Describe N	lame of entity:		% of ownership:	
43.	Custom	er lists, mailing	lists, or other compilat	ions		
	▼ No □ Yes	. Do your lists i No Yes. Desc		tifiable information (a	s defined in 11 U.S.C. § 101(41A))?	
44.	Any bus	siness-related p	roperty you did not alre	ady list		
	✓ No ☐ Yes	. Give specific ir	nformation.			
45.			all of your entries from ite that number here		entries for pages you have	\$0.00
Pa			r Farm- and Comme		nted Property You Own or Have a	ın Interest In.
46.	Do you	own or have an	y legal or equitable inte	rest in any farm- or co	ommercial fishing-related property?	
		Go to Part 7 Go to line 47.				
						Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm ar					ciaic c. c.cp.i.c.ic.
	✓ No ☐ Yes		oultry, farm-raised fish			
48.	Crops	either growing o	or harvested			
		. Give specific				
49.	Farm ar	nd fishing equip	ment, implements, mac	hinery, fixtures, and to	ools of trade	
	✓ No ☐ Yes	····				
50.	Farm ar	nd fishing suppl	ies, chemicals, and feed	d .		
	☑ No □ Yes	••••				

Deb	otor 1 Joni Akiko Konishi Matsuzak First Name Middle Name Last Name	Ki Case nu	ımber (if known)						
51.	Any farm- and commercial fishing-related property you did ✓ No ✓ Yes. Give specific information	not already list							
52.	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here								
Pa	Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above								
53.	3. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No								
	Yes. Give specific information.								
54.	Add the dollar value of all of your entries from Part 7. Write	e that number here	→	\$0.00					
Pa	art 8: List the Totals of Each Part of this Form								
55.	Part 1: Total real estate, line 2		→	\$0.00					
56.	Part 2: Total vehicles, line 5	\$5,775.00							
57.	Part 3: Total personal and household items, line 15	\$400.00							
58.	Part 4: Total financial assets, line 36	\$214,925.00							
59.	Part 5: Total business-related property, line 45	\$0.00							
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00							
61.	Part 7: Total other property not listed, line 54	+\$0.00							
62.	Total personal property. Add lines 56 through 61	\$221,100.00	Copy personal property total	+\$221,100.00					
63.	Total of all property on Schedule A/B. Add line 55 + line 6	2		\$221,100.00					

	Joni	Akiko Kor				
Debtor 2	First Name	Middle Name	Last Name			
(Spouse, if filing)		Middle Name	Last Name)		
United States Ba	nkruptcy Court fo	r the: DISTRICT	OF HAWAII			☐ Check if this is an
Case number (if known)						amended filing
Official Form	106C					
Schedule C	: The Prope	erty You Cla	aim as Exem	pt		04/10
Jsing the property	you listed on Schill out and attach t	hedule A/B: Prope to this page as ma	erty (Official Form 1	06A/B) as your source, list th	esponsible for supplying correct information. e property that you claim as exempt. If more essary. On the top of any additional pages,
s to state a spec exempted up to the eceive certain be exemption of 100	ific dollar amoun ne amount of any enefits, and tax-e % of fair market	at as exempt. Alt y applicable statu exempt retiremen value under a lav	ernatively, you ma utory limit. Some o it fundsmay be u w that limits the ex	y clai exemp nlimite empti	m the full fair market stionssuch as those ed in dollar amount. I	you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an lar amount and the value of the le statutory amount.
Part 1: Ide	entify the Prop	perty You Cla	im as Exempt			
. Which set of	exemptions are	you claiming?	Check one only	, even	if your spouse is filing	with you.
	•		ruptcy exemptions.	11 U	.S.C. § 522(b)(3)	
You are	claiming federal e	exemblions. II o				
. For any prop	erty you list on S			empt, 1	fill in the information	below.
Brief description	of the property a	Schedule A/B thank and line on rty		Am	fill in the information ount of the emption you claim	below. Specific laws that allow exemption
Brief description	of the property a	Schedule A/B tha and line on rty	at you claim as exe Current value of the portion you own	Am exe	ount of the	
Brief description Schedule A/B tha	of the property a	Schedule A/B tha and line on rty	Current value of the portion you own Copy the value fror	Am exe	ount of the emption you claim eck only one box for the exemption	Specific laws that allow exemption
Brief description Schedule A/B tha Brief description: 2012 Toyota Ya	of the property a t lists this proper ris (approx. 42	Schedule A/B thank and line on rty	Current value of the portion you own Copy the value from Schedule A/B	Am exe	ount of the emption you claim eck only one box for the exemption \$2,348.00 100% of fair market	
Brief description Schedule A/B that Brief description: 2012 Toyota Ya valued per NAD	of the property a t lists this proper ris (approx. 425 A	Schedule A/B thank and line on rty	Current value of the portion you own Copy the value from Schedule A/B	Am exe	ount of the emption you claim eck only one box for the exemption \$2,348.00	Specific laws that allow exemption
Brief description Schedule A/B that Brief description: 2012 Toyota Ya Valued per NAD Line from Schedul Brief description:	of the property a t lists this proper ris (approx. 425 A	Schedule A/B thank and line on rty	Current value of the portion you own Copy the value from Schedule A/B	Am exe	seck only one box for the exemption \$2,348.00 100% of fair market value, up to any applicable statutory limit \$200.00	Specific laws that allow exemption
2. For any prop Brief description Schedule A/B that Brief description: 2012 Toyota Yavalued per NAD Line from Schedul Brief description: Clothing	of the property a t lists this proper ris (approx. 425 A e A/B: 3.1	Schedule A/B thank and line on rty	Current value of the portion you own Copy the value from Schedule A/B \$5,775.00	Am exe	ount of the emption you claim eck only one box for the exemption \$2,348.00 100% of fair market value, up to any applicable statutory limit	Specific laws that allow exemption 11 U.S.C. § 522(d)(2)

Debtor 1 Joni Akiko Konishi Matsuzaki Case number (if known)

First Name Last Name Middle Name

Part 2:	Additional Page					
Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
		Copy the value from Schedule A/B		eck only one box for h exemption		
Brief descripti Jewelry Line from <i>Sch</i>		\$200.00		\$200.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)	
Brief descripti Cash Line from <i>Sch</i>		\$50.00		\$50.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	
Brief descripti Checking A Central Pac Line from Sch	ccount	\$1,300.00		\$1,300.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	
		\$100.00		\$100.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	
		\$500.00		\$500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	
		\$200.00		\$200.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	
Brief descripti Savings Bo At Residence Line from Sch	nds ce	\$3,500.00		\$3,500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	
Brief descripti 401(k) or si Line from <i>Sch</i>	milar plan	\$200,000.00		\$200,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(12)	
Brief descripti Pension pla Line from Sch	n	\$3,000.00		\$3,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(12)	

Schedule C: The Property You Claim as Exempt
U.S. Bankruptcy Court - Hawaii #16-01363 Dkt # 1 Filed 12/27/16 Page 21 of 54

Debtor 1 Joni Akiko Konishi Matsuzaki Case number (if known)

First Name Last Name Middle Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Security deposit on rental unit Line from Schedule A/B:	<u>\$1,500.00</u>	\$1,500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: 2015 Fed Refund Line from Schedule A/B:	\$3,000.00	\$3,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: 2015 State Refund Line from Schedule A/B:	\$1,000.00	\$1,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: Refund of child support payment from Norman Matsuzaki Line from Schedule A/B:30	\$775.00	\$775.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: Whole Life Insurance Policy Pacific Guardian Life Line from Schedule A/B:31	\$0.00	\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(8)

		entify your case:				
Debtor 1	Joni	Akiko Konishi	Matsuzaki			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for t	he: DISTRICT OF H	AWAII			
Case number (if known)					Check if this is amended filing	
Official Form	106D					
Schedule D:	Creditors V	Vho Have Clair	ns Secured b	y Property		12
On the top of any and the contract of the cont	additional pages, ors have claims s	write your name and o	case number (if kno		ies, and attach it to thi	
Part 1: Lis	in all of the informate t All Secured Control of the control of th			nedules. You have not	hing else to report on th	is form.
Part 1: Lis 2. List all secure claim, list the correditor has a	ed claims. If a cre creditor separately particular claim, lis ible, list the claims	ditor has more than one for each claim. If more the other creditors in in alphabetical order as	e secured than one Part 2. As ccording to the	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Part 1: Lis 2. List all secure claim, list the creditor has a much as poss creditor's nam	ed claims. If a cre creditor separately particular claim, lis ible, list the claims e.	ditor has more than one for each claim. If more the other creditors in in alphabetical order acceptable the posecures the claim.	e secured e than one Part 2. As ccording to the roperty that aim: Yaris (approx.	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion
Part 1: Lis 2. List all secure claim, list the coreditor has a much as poss creditor's name 2.1 Hawaiian Tel Fc Creditor's name 1138 N King St Number Street Honolulu City Who owes the det Debtor 1 only Debtor 2 only Debtor 1 and D	t All Secured Code claims. If a crecreditor separately particular claim, listible, list the claims e. HI 96817 State ZIP Code out? Check one.	ditor has more than one for each claim. If more the other creditors in in alphabetical order as 2012 Toyota 42500 miles), As of the date Contingent Unliquidate Disputed Nature of lien. An agreeme Statutory lies	e secured e than one Part 2. As ccording to the roperty that aim: Yaris (approx. valued pe you file, the claim is d Check all that apply	Column A Amount of claim Do not deduct the value of collateral \$3,427.00 So Check all that apply. As mortgage or secured mechanic's lien)	Column B Value of collateral that supports this claim \$5,775.00	Column C Unsecured portion

\$3,427.00

\$3,427.00

Add the dollar value of your entries in Column A on this page. Write

If this is the last page of your form, add the dollar value totals from

that number here:

all pages. Write that number here:

Fill in this inf	ormation to ider	ntify your case:		
Debtor 1	Joni First Name	Akiko Konishi Middle Name	Matsuzaki Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the	e: DISTRICT OF H A	WAII	
Case number (if known)				Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

 Do any creditors have priority unsecured claims against you 	1.	Do any	creditors	have	priority	unsecured	claims	against	you
---	----	--------	-----------	------	----------	-----------	--------	---------	-----

No. Go to Part 2.

☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

Total claim

Priority amount

Nonpriority amount

Debtor 1	Joni	Akiko Konishi	Matsuzaki	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	List All of Y	our NONPRIORITY	Unsecured Claim	IS	
3. Do any	y creditors have n	onpriority unsecured of	claims against you?		
ΠN	o. You have nothir	ng to report in this part.	Submit this form to the	court with your other schedules.	
M √	es			·	
سخا					
	•	•	•	er of the creditor who holds each claim.	
			·	tor separately for each claim. For each claim list	•
				han one creditor holds a particular claim, list the	otner creditors in
rait 3.	ii iiiole space is ii	leeded for horiphority di	isecureu ciaims, iii out	the Continuation Page of Part 2.	
					Total claim
					Total Claim
4.1					60 400 00
					\$9,188.00
	Savings Bank reditor's Name		Last 4 digits of accou	int number	
Po Box 23			When was the debt in	ncurred? <u>12/15</u>	
Number	Street		As of the date you file	e, the claim is: Check all that apply.	
			Contingent		
			Unliquidated		
Honolulu	H	l 96804	Disputed		
City		ate ZIP Code	Type of NONPRIORIT	TY unsecured claim:	
		neck one.	Student loans		
☑ Debtor				g out of a separation agreement or divorce	
Debtor	2 only 1 and Debtor 2 only	,	-	port as priority claims	
	one of the debtors	•		or profit-sharing plans, and other similar debts	
			Other. Specify		
_		a community debt	Personal Loan		
	subject to offset	<i>(</i>			
☑ No □ Yes					
4.2					\$4,263.00
 Bank Of A	morica		Last 4 digits of accou	int number	Ψ+,200.00
	editor's Name		When was the debt in		
Po Box 98				<u> </u>	
Number	Street		_	e, the claim is: Check all that apply.	
			☐ Contingent☐ Unliquidated		
			Disputed		
El Paso	T				
City		ate ZIP Code	Type of NONPRIORIT	Y unsecured claim:	
		neck one.	☐ Student loans		
✓ Debtor :	•		ш -	g out of a separation agreement or divorce	
	2 only 1 and Debtor 2 only	V	,	port as priority claims	
	one of the debtors	•		or profit-sharing plans, and other similar debts	
— □ Checki	if this claim is for	a community debt	Other. Specify Credit Cards		
_	subject to offset	•	Orcait Gards		
ortine ciaini √i No	. 230,000 10 011301	•			
Yes					
_					

Debtor 1 Akiko Konishi Case number (if known)

Matsuzaki Last Name Joni First Name Middle Name

After listing any entries on this page, number the previous page.	in sequentially from the	Total claim
4.3		\$19,000.00
Barclays Bank Delaware	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred? 5/06	
Po Box 8803 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Wilmington DE 10900	Disputed	
Wilmington DE 19899 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
✓ Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Credit Cards	
Is the claim subject to offset?		
No Vos		
Yes		
4.4		\$9,328.00
LI Citibank	Last 4 digits of account number	Ψ3,320.00
Nonpriority Creditor's Name	 	
Po Box 6497		
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	Disputed	
Sioux Falls SD 57117		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
☐ Check if this claim is for a community debt	Credit Cards	
Is the claim subject to offset?		
☑ No		
Yes		
4.5		2442440
		\$14,944.00
Discover Financial Services Nonpriority Creditor's Name	Last 4 digits of account number	
Po Box 15316	When was the debt incurred? 2/09	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Wilmington DE 19850		
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Cards	
Is the claim subject to offset?		
✓ No		
Yes		

Debtor 1 Akiko Konishi Case number (if known)

Matsuzaki Last Name Joni First Name Middle Name

After listing any entries on this page, number the	em sequentially from the	
previous page.	an osquentian, nom ale	Total claim
4.6		\$4,385.00
First Hawaiian Bank	Last 4 digits of account number	
Nonpriority Creditor's Name Po Box 3200	When was the debt incurred? 6/14	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Honolulu HI 96847	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	☑ Other. Specify	
<u>'</u>	Personal Loan	
Is the claim subject to offset? ✓ No		
☑ No □ Yes		
4.7		\$3.825.00
Hawaii State Federal Cu	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred? 3/99	
560 Halekauwila Street		
Number Street	As of the date you file, the claim is: Check all that apply. — Contingent	
	Unliquidated	
	─ ☐ Disputed	
Honolulu HI 96813 City State ZIP Code		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations original out of a constation agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Cards	
Is the claim subject to offset?		
☑ No		
Yes		
4.8		\$5,426.00
Navient	Last 4 digits of account number	
Nonpriority Creditor's Name Po Box 9500	When was the debt incurred? 11/03	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Wilkes Barre PA 18773	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset? ✓ No		
☑ No ☐ Yes		

Debtor 1 Akiko Konishi Case number (if known)

Matsuzaki Last Name Joni First Name Middle Name

Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.9		Unknown
Norman S. Matsuzaki	Last 4 digits of account number	
Nonpriority Creditor's Name 1601 Lusitana Street	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Honolulu HI 96813	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Martital Property Disputes-atty fees and 401(k)	
Is the claim subject to offset?		
☑ No		
Yes		
4.10		\$8,106.00
Sync/sams Club Dc	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred? 12/06	
Po Box 965005 Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
	Unliquidated	
Orlando FL 32896	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Cards	
Is the claim subject to offset?		
☑ No		
Yes		
4.11		\$41.00
The Radiology Group Inc	Last 4 digits of account number	Ψ+1.00
Nonpriority Creditor's Name	When was the debt incurred? 1/16	
941 Kamehameha Hwy, Suite 208 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Pearl City HI 96782	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Medical Bill	
Is the claim subject to offset?		
☑ No		
T Yes		

Debtor 1	Joni	Akiko Konishi	Matsuzaki	Case number (if known)
	First Name	Middle Name	Last Name	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

ttorney		On which entry in Part 1 or Part 2 did you list the original creditor?			
		Line 4.7 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims			
HI State	96806-1757 ZIP Code	— Last 4 digits of account number			
		On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.11 of (Check one): Part 1: Creditors with Priority Unsecured Claims			
HI	96734	Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number —			
	HI State	HI 96806-1757 State ZIP Code HI 96734			

Collecting For The Radiology Group

Debtor 1	Joni	Akiko Konishi	Matsuzaki	Case number (if known)	
	First Name	Middle Name	Last Name		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a.	Domestic support obligations	6a. \$0.00
nom rait i	6b.	Taxes and certain other debts you owe the government	6b. \$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c. \$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. +\$0.00
	6e.	Total. Add lines 6a through 6d.	6d. \$0.00
			Total claim
Total claims from Part 2	6f.	Student loans	6f. \$5,426.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h. \$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} +\$73,080.00
	6j.	Total. Add lines 6f through 6i.	6j. \$78,506.00

Fill in this information to identify your case:					
Debtor 1	Joni First Name	Akiko Konishi Middle Name	Matsuzaki Last Name		
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court fo	or the: DISTRICT OF H	AWAII		
Case number (if known)					

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B*: *Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Fill in this i				
Debtor 1	Joni First Name	Akiko Konishi Middle Name	Matsuzaki Last Name	
Debtor 2				
(Spouse, if filin	g) First Name	Middle Name	Last Name	
United States E	Bankruptcy Court fo	or the: DISTRICT OF H	AWAII	
Case number				П
(if known)				_

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

	eded, copy the Additional Page, fill it out, and number the entries ge. On the top of any Additional Pages, write your name and cas	_
1.	Do you have any codebtors? (If you are filing a joint case, do n ☑ No ☐ Yes	ot list either spouse as a codebtor.)
2.	Within the last 8 years, have you lived in a community property include Arizona, California, Idaho, Louisiana, Nevada, New Mexico	
	 No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live No Yes 	with you at the time?
3.	In Column 1, list all of your codebtors. Do not include your sponders shown in line 2 again as a codebtor only if that person creditor on Schedule D (Official Form 106D), Schedule E/F (Off Schedule D, Schedule E/F, or Schedule G to fill out Column 2.	is a guarantor or cosigner. Make sure you have listed the
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
		Check all schedules that apply:

Official Form 106H

	ill in this inforn	nation to iden	tify your case:					
	Debtor 1	Joni	Akiko Konis	shi Mat	suzaki			
		First Name	Middle Name	Last	Name		Che	ck if this is:
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	l ast	Name		_	An amended filing
	United States Bank				· taiiio			A supplement showing postpetition
	Case number	ruptcy Court for ti	ic. <u>2.01.11.01.01</u>					chapter 13 income as of the following date:
	(if known)							MM / DD / YYYY
0	fficial Form 10	<u> </u>						
So	chedule I: Yo	ur Income						12/15
res inc abo you	sponsible for suppl slude information a out your spouse. It ur name and case r	ying correct info bout your spous f more space is i	ormation. If you are e. If you are separa needed, attach a se n). Answer every q	married and ted and you parate shee	d not filing ur spouse	g jointly is not t	, and your : iling with y	Debtor 2), both are equally spouse is living with you, ou, do not include information any additional pages, write
1.	Fill in your emplo	oyment		Dahtan 4				Dahtan O an man filian amana
	If you have more		_	Debtor 1				Debtor 2 or non-filing spouse
	job, attach a sepa with information a	ato page	ployment status	✓ Emplo	oyed mployed			☐ Employed☐ Not employed
	additional employ	ers.	cupation	Administ				,
	Include part-time, or self-employed v		ployer's name	Hawaiian	Electric			_
	Occupation may in student or homem applies.	— 111	ployer's address	Po Box 2 Number Str				Number Street
				Honolulu City		HI State	96840 Zip Code	City State Zip Code
		11		· _	voore 9 n		•	5.0,
		но	w long employed th	ere ? <u>5 '</u>	years 8 n	10111115	_	
F	Part 2: Give I	Details About	Monthly Income)				
	timate monthly incon- n-filing spouse unles			. If you hav	e nothing t	o report	for any line	, write \$0 in the space. Include your
	• .	•		r, combine t	he informa	ation for	all employe	rs for that person on the lines below. If
you	u need more space,	attach a separate	sheet to this form.					
						For D	ebtor 1	For Debtor 2 or non-filing spouse
2.			r, and commissions nthly, calculate what		2. wage		\$6,848.83	
3.	Estimate and list	monthly overting	ne pay.		3.	+	\$0.00	
4.	Calculate gross i	income. Add line	e 2 + line 3.		4.	;	\$6,848.83	

Deb	tor 1	Joni	Akiko Konisl	ni Matsuzaki	Matsuzaki Case number (if known)							
		First Name	Middle Name	Last Name						,		
						Fo	r Debtor 1		or Debto on-filing		<u>. </u>	
	Сор	y line 4 here			 → 4.		\$6,848.83					
5.	List	all payroll ded	luctions:		-	_						
٠.			e, and Social Security de	ductions	5a.		\$1,914.10					
			entributions for retiremen		5a. 5b.	_	\$0.00					
		-	ntributions for retirement			-	\$0.00					
		-		•	5c.	-	\$0.00					
			ayments of retirement fu	na ioans	5d.	_	\$581.68					
		Insurance			5e.	_						
	5f.	•	port obligations		5f.	_	\$0.00					
	- 3	Union dues			5g.	_	\$0.00					
	5h.	Other deducti Specify: Parl			5h	+ _	\$70.07					
6.	Add 5g +	the payroll de 5h.	ductions. Add lines 5a	+ 5b + 5c + 5d + 5e +	+ 5f + 6.	_	\$2,565.85					
7.	Calc	ulate total mo	nthly take-home pay.	Subtract line 6 from I	line 4. 7.		\$4,282.98					
8.	List	all other incon	ne regularly received:									
	8a.		om rental property and f fession, or farm	rom operating a	8a.	_	\$0.00					
			ment for each property and , ordinary and necessary b nly net income.	0	nd							
	8b.	Interest and d	lividends		8b.		\$0.00					
	8c.		rt payments that you, a i	non-filing spouse, or	a 8c.	_	\$0.00					
			y, spousal support, child s nent, and property settlem	• •	,							
	0~1				04		¢0.00					
			nt compensation		8d.	_	\$0.00					
		Social Securit	•		8e.	_	\$0.00					
	8f.	_	ment assistance that you									
		cash assistand	essistance and the value (in the value (in the that you receive, such a rethe Supplemental Nutritions idies.	as food stamps	m)							
		Specify:			8f.		\$0.00					
	9.0		tirement income			-	\$0.00					
	•	Other monthly			8g.	_	\$0.00					
	8h.	Specify:	y income.		8h.,		\$0.00					
						╌	Ψ0.00	, ,				
9.	Add	all other incor	ne. Add lines 8a + 8b + 8	3c + 8d + 8e + 8f + 8g	+ 8h. 9.	L	\$0.00					
10.			income. Add line 7 + linne 10 for Debtor 1 and De		10. ouse.	_	\$4,282.98]+[=	\$4,282.98
11.	Inclu		ular contributions to the s from an unmarried partr					our ro	ommates	, and oth	ner	
	Do r	not include any	amounts already included	in lines 2-10 or amou	ints that are	not a	available to pay	expe	enses list	ed in Scl	hedı	ıle J.
	Spe	cify:								11.	+ _	\$0.00
12.	inco		the last column of line tamount on the Summary							12.		\$4,282.98 Combined nonthly income
13.	Dον	ou expect an i	increase or decrease wit	hin the year after vo	u file this fo	orm?	•					ž.
		No. Yes. Explain:	None.	,								
		. oo. Explain.										

F	ill in this inform	ation to identi	fy your case:			Oh a	-1. if #l-:-	. :	
	Debtor 1	Joni	Akiko Konishi	Matsu	ızaki	l Che □	ck if this	s is: ended filing	
	Debior 1	First Name	Middle Name	Last Na		ᅢ		lement showing	postpetition
	Debtor 2	First Name	Middle News	Loot No.		_	chapte	r 13 expenses a	
	(Spouse, if filing)	First Name	Middle Name	Last Na	me		101101111	ig dato.	
	United States Bankr	uptcy Court for the	DISTRICT OF HAV	WAII			MM / D	D / YYYY	
	Case number (if known)								
01	ficial Form 10	<u>6J</u>							
Sc	chedule J: Yo	ur Expense	s						12/15
COI	rect information. If	more space is no	le. If two married peop eeded, attach another s wer every question.						
P	art 1: Descri	be Your House	ehold						
1.	Is this a joint case	?							
	No □ Yes	ebtor 2 live in a s Debtor 2 must fi	eparate household? le Official Form 106J-2,	Expenses	s for Separate Housel	nold of	f Debtor	2.	
2.	Do you have depe		No Yes. Fill out this inforr for each dependent		Dependent's relation		p to	Dependent's age	Does dependent live with you?
	Debtor 2.		ror each dependent		Son			9	□ No
	Do not state the de	pendents'							− ☑ Yes
	names.				Daughter			7	□ No - ☑ Yes
									□ No
									Yes
									□ No □ Yes
									□ No
									−
3.	Do your expenses expenses of peop yourself and your	le other than	☑ No ☐ Yes						
-	art 2: Estima	ita Vaur Onga	ing Monthly Expen	205					
Est	timate your expense	es as of your bank of a date after the	kruptcy filing date unle	ess you a	-	-		-	
			h government assistan n Schedule I: Your Inco					Your expens	ses
4.			enses for your residen any rent for the ground					4	\$1,550.00
	If not included in	0 . ,	,	• •					
	4a. Real estate ta	xes						4a	
	4b. Property, hom	eowner's, or rente	r's insurance					4b	\$25.00
	, ,		upkeep expenses					4c.	
		association or cor						4d.	

Debtor 1	Joni	Akiko Konishi	Matsuzaki	Case number (if known)	
	First Name	Middle Name	Last Name		

			Your expenses	
5.	Additional mortgage payments for your residence, such as hon	ne equity loans	5.	
6.	Utilities:			
	6a. Electricity, heat, natural gas		6a.	\$85.00
	6b. Water, sewer, garbage collection		6b	\$0.00
	6c. Telephone, cell phone, Internet, satellite, and		6c	\$100.00
	cable services 6d. Other. Specify:		6d.	
7.	Food and housekeeping supplies		7.	\$800.00
8.	Childcare and children's education costs		8.	\$300.00
9.	Clothing, laundry, and dry cleaning (Se	ee continuation sheet(s) for details)	9.	\$220.00
10.			10.	\$120.00
11.	Medical and dental expenses		11.	\$180.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. (See	12.	\$400.00	
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$250.00	
14.	Charitable contributions and religious donations		14.	\$0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lin	nes 4 or 20.		
	15a. Life insurance		15a.	
	15b. Health insurance		15b.	
	15c. Vehicle insurance		15c.	\$75.00
	15d. Other insurance. Specify:		15d.	\$0.00
16.	Taxes. Do not include taxes deducted from your pay or included Specify:		16.	\$0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1 Toyota Yaris		17a.	\$175.00
	17b. Car payments for Vehicle 2		17b.	
	17c. Other. Specify:		17c.	
	17d. Other. Specify:		17d.	
18.	Your payments of alimony, maintenance, and support that you deducted from your pay on line 5, Schedule I, Your Income (Of	ı did not report as	18.	
19.	Other payments you make to support others who do not live w Specify:	rith you.	19.	

Debt	or 1	Joni	Akiko Konishi	Matsuzaki	Case number (if known	n)
		First Name	Middle Name	Last Name		
		er real property edule I: Your Inc	expenses not included in lincome.	nes 4 or 5 of this form or o	n	
	20a.	Mortgages on	other property		20a.	
	20b.	Real estate ta	xes		20b.	
	20c.	Property, hom	eowner's, or renter's insuranc	е	20c.	
	20d.	Maintenance,	repair, and upkeep expenses		20d.	
	20e.	Homeowner's	association or condominium	dues	20e.	
21.	Othe	er. Specify:			21.	
22.	Calc	ulate your mon	thly expenses.			
	22a.	Add lines 4 th	rough 21.		22a.	\$4,280.00
	22b.	Copy line 22 (monthly expenses for Debtor	2), if any, from Official Form	106J-2. 22b.	
	22c.	Add line 22a a	and 22b. The result is your mo	onthly expenses.	22c.	\$4,280.00
23.	Calc	ulate your mon	thly net income.		_	
	23a.	Copy line 12 (your combined monthly incom	e) from Schedule I.	23a.	\$4,282.98
	23b.	Copy your mo	nthly expenses from line 22c	above.	23b. –	\$4,280.00
	23c.		monthly expenses from your rour monthly net income.	monthly income.	23c.	\$2.98
24.	Do y	ou expect an ir	ncrease or decrease in your	expenses within the year	after you file this form?	
			expect to finish paying for yo or decrease because of a mo		r do you expect your mortgage ur mortgage?	
	$\overline{\mathbf{V}}$	No				
		Yes. Explain he None.	ere:			
		i vono.				

Debt	tor 1	Joni	Akiko Konishi	Matsuzaki	Case number (if know	m)
		First Name	Middle Name	Last Name		
9.	Clot	hing, laundry, and dry	cleaning (details):			
	Clot	thing				\$200.00
	Lau	ndry/Dry Cleaning				\$20.00
					Total:	\$220.00
10.	Pers	sonal care products an	nd services (details):			
		•	, ,			\$120.00
					Total:	\$120.00
12	Tran	nsportation (details):				
	- Tai	ioportation (details).				\$400.00
					Total:	\$400.00

Fill in this info							
Debtor 1	Joni First Name	Akiko Konishi Middle Name	Matsuzaki Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bar	United States Bankruptcy Court for the: DISTRICT OF HAWAII						
Case number (if known)						Chec amen	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below							
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?							
☑ No							
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).						
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.							
X /s/ Joni Akiko Konishi Matsuzaki Joni Akiko Konishi Matsuzaki, Debtor 1	X Signature of Debtor 2						
Date <u>12/16/2016</u> MM / DD / YYYY	Date MM / DD / YYYY						

F	ill in	this inf	ormation to	identify your case:			e box only as dire			
D	ebtor '	1	Joni	Akiko Konishi	Matsuzaki	_ -	in Form 122A-1Su			
			First Name	Middle Name	Last Name	11	no presumption of abus			
(S		e, if filing)	First Name	Middle Name	Last Name	of abuse	ulation to determine if a applies will be made ufest Calculation (Official	nder Chapter 7		
U	nited S	States Ba	nkruptcy Court f	or the: DISTRICT OF HA	AWAII	- │	ins Test does not apply	now because		
	ase nu know					of qualifi later.	ed military service but i	t could apply		
						Check if t	his is an amended filing]		
Of	ficia	l Form	122A-1							
Cł	napt	er 7 S	tatement o	of Your Current M	Ionthly Income			12/1		
info are mili 122	ormati exem itary s	on applie pted from service, c upp) with	es. On the top on a presumption complete and file this form.	of any additional pages, v n of abuse because you	et to this form. Include th write your name and case do not have primarily con n from Presumption of Ak	number (if know) sumer debts or b	n). If you believe that pecause of qualifying	you		
_				•						
1.	wna	-		ng status? Check one onl	y.					
	abla	Not mar	ried. Fill out Col	lumn A, lines 2-11.						
		Married	and your spou	se is filing with you. Fill o	out both Columns A and B,	lines 2-11.				
		Married	and your spou	se is NOT filing with you.	You and your spouse ar	e:				
		Livi	ing in the same	household and are not le	egally separated. Fill out b	ooth Columns A and	d B, lines 2-11.			
		Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).								
	banl Augu in the	kruptcy c ust 31. If e result.	the amount of y Do not include a	§ 101(10A). For example our monthly income varied any income amount more the	from all sources, derived i, if you are filing on Septen I during the 6 months, add than once. For example, if be the nothing to report for any	nber 15, the 6-mon the income for all 6 both spouses own t	th period would be Marc months and divide the the same rental property	ch 1 through total by 6. Fill		
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse			
2.		-	vages, salary, ti yroll deductions)	ps, bonuses, overtime, a	nd commissions	\$6,837.97				
3.		n ony and Dlumn B is	•	ayments. Do not include	payments from a spouse	\$0.00				
4.	regu your a sp	enses of lar contribution depende	you or your depoutions from an ents, parents, and	e which are regularly pai bendents, including child unmarried partner, membe d roommates. Include regun not filled in. Do not include	I support. Include ers of your household, ular contributions from	\$0.00				

Dep	tor 1 Joni Akiko	Konisni iliai	tsuzaki		ase number (if k	nown)	
	First Name Middle N	lame Last	Name				_
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
5.	Net income from operating a busine	ess, profession, o	r farm				
		Debtor 1	Debtor 2				
	Gross receipts (before all deductions)	\$0.00		-			
	Ordinary and necessary operating — expenses	\$0.00		- Сору			
	Net monthly income from a business, profession, or farm	\$0.00		here →	\$0.00		
6.	Net income from rental and other re	eal property					
		Debtor 1	Debtor 2				
	Gross receipts (before all deductions)	\$0.00		-			
	Ordinary and necessary operating expenses	- \$0.00	–	- Copy			
	Net monthly income from rental or other real property	\$0.00		here →	\$0.00		
7.	Interest, dividends, and royalties				\$0.00		
8.	Unemployment compensation				\$0.00		
	Do not enter the amount if you conter benefit under the Social Security Act.						
	For you			.00			
	For your spouse						
9.	Pension or retirement income. Do not was a benefit under the Social Securi	•	ount received tha	t	\$0.00		
10.	Income from all other sources not I amount. Do not include any benefits or payments received as a victim of a or international or domestic terrorism. separate page and put the total below	received under the war crime, a crime If necessary, list	Act y,				
	Total amounts from separate pages, i	•		+		+	
11.	Calculate your total current month! Add lines 2 through 10 for each colum	nn.			\$6,837.97	+	\$6,837.97
	Then add the total for Column A to the	e total for Column	В.	L			Total current monthly income

Debtor 1			oni rst Name	Akiko Konishi me Middle Name			Case number (if known)	
P	art 2:		Determine WI	hether the Means	Test Applies t	o You		
12.	Calcı	ulate	your current mo	onthly income for the	year. Follow these	steps:		
	12a.	Cop	y your total curre	ent monthly income from	m line 11		Copy line 11 here -> 12a\$6	,837.97
		Mul	tiply by 12 (the nu	umber of months in a y	rear).		<u>x</u>	12
	12b. The result is your annual income for this part of the form.			12b. \$82	,055.64			
13. Calculate the median family income that applies to you. Follow these steps:								
	Fill in	the s	state in which you	ı live.	Hawa	aii		
	Fill in	the r	number of people	in your household.	3			
Fill in the median family income for your state and size of household								,039.00
				nedian income amoun his list may also be av				
14.	How	do th	ne lines compare	?				
	14a.	$\overline{\mathbf{A}}$	Line 12b is less Go to Part 3.	than or equal to line 1	3. On the top of pa	age 1, check	box 1, There is no presumption of abuse.	
	14b.			e than line 13. On the d fill out Form 122A-2.	top of page 1, chec	ck box 2, <i>The</i>	e presumption of abuse is determined by Form 122.	4-2.
P	art 3:		Sign Below					
	Bv	sianir	ng here. I declare	under penalty of periu	rv that the informat	ion on this st	atement and in any attachments is true and correc	t.
	,	- 3	3		,		,	
			oni Akiko Koni Akiko Konishi Ma			X Sign	ature of Debtor 2	—
	ı	Date_	12/16/2016			Date		
			MM / DD / YYY				MM / DD / YYYY	
	If yo	ou ch	ecked line 14a, d	o NOT fill out or file Fo	orm 122A-2.			

If you checked line 14b, fill out Form 122A-2 and file it with this form.

	III in this inf	ormation to ident	Akiko Konishi	Matsuzaki	i			
		First Name	Middle Name	Last Name				
	ebtor 2 pouse, if filing)	First Name	Middle Name	Last Name				
Ur	nited States Ba	nkruptcy Court for the:	DISTRICT OF H	AWAII				
	ase number known)	_			_	Check if this amended fil		
Off	ficial Form	107						
			airs for Indiv	viduals Fi	ling for Bankrı	uptcy	04/16	
you	rect information rections rection rections recti	on. If more space is n se number (if known	needed, attach a se). Answer every q	eparate sheet tuestion.		equally responsible for support of any additional pages		
1.	What is your ☐ Married ✓ Not marrie	current marital status	s?					
2.								
3.	(Community p					ity property state or territo ada, New Mexico, Puerto Ri		
	✓ No ☐ Yes. Mak	e sure you fill out Sch	edule H: Your Code	ebtors (Official I	Form 106H).			
Pa	art 2: Ex	plain the Sources	of Your Incom	e				
4.	Fill in the total	amount of income you	u received from all j	obs and all bus	usiness during this yes sinesses, including par ether, list it only once u		endar years?	
	□ No ☑ Yes. Fill	n the details.						
			Debtor 1			Debtor 2		
			Sources of Check all th		Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions	
		f the current year unt for bankruptcy:	il ☑ Wages, bonuse	commissions, s, tips	\$73,783.44	Wages, commissions, bonuses, tips		
			☐ Operati	ng a business		Operating a business		
	the last calen	•		commissions, s, tips	\$83,216.65	Wages, commissions, bonuses, tips		
(Jar	nuary 1 to Dece	mber 31, <u>2015</u>)		ng a business		Operating a business		
For	the calendar y	ear before that:	☑ Wages, bonuse:	commissions,	\$79,544.73	☐ Wages, commissions, bonuses, tips		
(Jar	nuary 1 to Dece	mber 31, 2014)		ng a business		☐ Operating a business		

Official Form 107

Deb	-	Joni First Name	Akiko Konishi Middle Name	Matsuzaki Last Name	Case number (if known)			
5.	Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details.							
P	art 3:	List Certain P	ayments You Ma	de Before You F	Filed for Bankruptcy			
6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?					s?			
	□ No.		1 nor Debtor 2 has prindividual primarily for a	•	lebts. Consumer debts are defined in 11 U.S.C. § 101(8) as r household purpose."			
		During the 90 da	ys before you filed for	bankruptcy, did you	pay any creditor a total of \$6,425* or more?			
☐ No. Go to line 7.								
		total an	nount you paid that cre	ditor. Do not include	of \$6,425* or more in one or more payments and the e payments for domestic support obligations, such as ayments to an attorney for this bankruptcy case.			
		* Subject to adju	stment on 4/01/19 and	every 3 years after	that for cases filed on or after the date of adjustment.			
	✓ Yes.	Debtor 1 or Deb	tor 2 or both have pri	marily consumer d	lebts.			
		During the 90 da	ys before you filed for	bankruptcy, did you	pay any creditor a total of \$600 or more?			
		No. Go to lin	e 7.					
		creditor		ents for domestic su	of \$600 or more and the total amount you paid that upport obligations, such as child support and alimony. his bankruptcy case.			
7.	7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony. No Yes. List all payments to an insider.							
	Yes.	List all payments	to an insider.					

Debtor 1	Joni	Akiko Konishi	Matsuzaki	Case number (if	: known)					
Deptor 1	First Name	Middle Name	Last Name	Case number (ii	KIIOWII)					
	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?									
Inclu	ide payments on del	bts guaranteed or cosign	ed by an insider.							
7	No									
-		nts that benefited an insid	der.							
_										
Don't 4	lalamtifu la	nal Astiona Dones								
Part 4	identify Le	gal Actions, Repos	sessions, and For	eciosures						
				y lawsuit, court action, or	-	_				
	all such matters, inc ifications, and contr		ses, small claims action	s, divorces, collection suits	, paternity actions	s, support or custody				
		act alopatoo.								
	No Kan Fill in the date:									
\square	Yes. Fill in the detain	IIS.								
Case title		Nature of the		Court or agency		Status of the case				
	terest of Matsuza	aki Child Custo	dy	Kapolei		Pending				
Children	n			Court Name		_				
				Number Street						
Case nun	nber <u>FC-S15-001</u>	70				Concluded				
				City	State ZIP C	ode				
Case title)	Nature of the	case	Court or agency		Status of the case				
HI STAT	E FCU VS JONI A	A K Civil collect	ion	Honolulu		— B				
MATSU	ZAKI			Court Name		Pending				
				Number Street		On appeal				
Case nun	nber 1RC161007 1	157		Number Street		☐ Concluded				
						<u> </u>				
				City	State ZIP C	ode				
				•		0				
Case title		Nature of the		Court or agency		Status of the case				
Enforce	ment of Divorce	Decree enforcemer divorce dec		in Family Court Court Name		Pending				
		divorce acc	100	Kapolei						
0	50 D.N . 40	4.44==		Number Street						
Case nun	nber FC-D No. 13	<u>-1-11//</u>				Concluded				
				City	State ZIP C	ode.				
				Oity	State ZIP C	ouc				

Deb	tor 1	Joni First Name	Akiko Konishi Middle Name	Matsuzaki Last Name	Case number (if k	nown)	
10.	Within '				operty repossessed, foreclosed	d garnished attach	ned
	seized,	or levied?	in the details below.	nao any or your pro	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	., gaoo., aao.	,
	-	Go to line 11.	tion below.				
11.		•			ncluding a bank or financial ins se you owed a debt?	stitution, set off any	,
	✓ No ☐ Yes	. Fill in the details.					
12.		-	iled for bankruptcy, ed receiver, a custod		operty in the possession of an cial?	assignee for the be	nefit of
	✓ No ☐ Yes						
Pa	art 5:	List Certain G	Sifts and Contrib	utions			
13.	Within 2	2 years before you	filed for bankruptcy	, did you give any g	ifts with a total value of more t	han \$600 per perso	n?
	✓ No ☐ Yes	. Fill in the details f	or each gift.				
14.	. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?						
	I ✓ No						
		. Fill in the details f	or each gift or contrib	ution.			
Pa	art 6:	List Certain L	osses				
15.		1 year before you f isaster, or gamblin		or since you filed fo	r bankruptcy, did you lose any	thing because of th	eft, fire,
	✓ No ☐ Yes	. Fill in the details.					
Pa	art 7:	List Certain P	Payments or Tran	sfers			
16.			iled for bankruptcy, out seeking bankrup		else acting on your behalf pay of ankruptcy petition?	or transfer any prop	perty to
	Include	any attorneys, bank	ruptcy petition prepar	ers, or credit counse	ling agencies for services require	ed for your bankrupto	cy.
	□ No ✓ Yes	. Fill in the details.					
	ke Goo	dman, PC	Des	scription and value	of any property transferred	Date payment or transfer was made	Amount of payment
		reet Mall, #1727				11/22/2016	\$1,465.00
Num							
Hor City	nolulu	HI State	96813 ZIP Code				
Ema	il or websit	e address					
Pers	on Who M	ade the Payment, if No	t You				

Deb	tor 1	Joni	Akiko Konishi	Matsuzaki	Case number (if known)
47	Mish: a	First Name	Middle Name	Last Name	
17.				•	e acting on your behalf pay or transfer any property to ke payments to your creditors?
	Do not i	nclude any payment	or transfer that you lis	sted on line 16.	
	☑ No				
		. Fill in the details.			
18.				did you sell, trade, or our business or final	r otherwise transfer any property to anyone, other than ncial affairs?
		•		, ,	granting of a security interest or mortgage on your property).
	Do not ii	nclude gifts and trar	isters that you have al	ready listed on this sta	itement.
	√ No				
	☐ Yes	. Fill in the details.			
19.				r, did you transfer any Lasset-protection devic	y property to a self-settled trust or similar device of which ces.)
	✓ No	,		•	,
	☐ Yes	. Fill in the details.			
Pa	art 8:	List Certain F	inancial Account	s, Instruments, S	afe Deposit Boxes, and Storage Units
20.		year before you fi		vere any financial acc	counts or instruments held in your name, or for your
			•	r financial accounts; cos, and other financial in	ertificates of deposit; shares in banks, credit unions, brokerage nstitutions.
	☑ No				
	_	. Fill in the details.			
21.	-	now have, or did y ırities, cash, or oth	•	r before you filed for	bankruptcy, any safe deposit box or other depository
	☑ No				
	☐ Yes	. Fill in the details.			
22.	-	ou stored property	in a storage unit or p	lace other than your	home within 1 year before you filed for bankruptcy?
	✓ No ☐ Yes	. Fill in the details.			
P	art 9:	Identify Prone	erty You Hold or (Control for Some	one Fise
					ude any property you borrowed from, are storing for,
_0.	•	in trust for someon		one disc owns: more	and any property you borrowed from, are storing for,
	☑ No				
	Yes	. Fill in the details.			

Deb	otor 1	Joni	Akiko Konishi	Matsuzaki		Case number (if known)	
		First Name	Middle Name	Last Name		· /	
P	Part 10: Give Details About Environmental Information						
For	For the purpose of Part 10, the following definitions apply:						
ŀ	■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.						
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.						
Rep	ort all n	otices, releases, and	d proceedings that y	ou know about, re	egardless of v	when they occurred.	
24.	Has an law?	y governmental unit	notified you that yo	u may be liable o	r potentially li	able under or in violation of an environmental	
	✓ No	s. Fill in the details.					
25.	 Have you notified any governmental unit of any release of hazardous material? ✓ No ✓ Yes. Fill in the details. 						
26.	26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						
	✓ No	s. Fill in the details.					
P	art 11:	Give Details A	bout Your Busin	ess or Connec	ctions to Ar	ny Business	
27.	Within busine		iled for bankruptcy,	did you own a bu	siness or hav	re any of the following connections to any	
		A member of a limit A partner in a partn An officer, director,	ted liability company (LLC) or limited liab	oility partnershi	either full-time or part-time ip (LLP)	
	-		applies. Go to Part 12 ly above and fill in the		each business.		
28.			iled for bankruptcy, editors, or other part		ancial statem	ent to anyone about your business? Include	
	□ No □ Ye	s. Fill in the details b	elow.				

Debtor 1	Joni	Akiko Konishi	Matsuzaki	Case number (if known)
	First Name	Middle Name	Last Name	
Part 12	Sign Belov	w		
that answ property b	ers are true and one oy fraud in conne	correct. I understand the	at making a false stater	achments, and I declare under penalty of perjury ment, concealing property, or obtaining money or s up to \$250,000, or imprisonment for up to 20 years,
	ni Akiko Konish kiko Konishi Matsu		X Signature of Debte	or 2
Date _	12/16/2016	, -	Date	<u></u>
Did you at	ttach additional p	pages to Your Statement	of Financial Affairs for	Individuals Filing for Bankruptcy (Official Form 107)?
✓ No ☐ Yes				
Did you pa	ay or agree to pa	y someone who is not a	n attorney to help you f	ill out bankruptcy forms?
✓ No	Name of person			Attach the Rankruntov Patition Prenarer's Notice

Declaration, and Signature (Official Form 119).

Fill in this inf	ormation to	identify your case:	
Debtor 1	Joni First Name	Akiko Konishi Middle Name	Matsuzaki Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Ba	nkruptcy Court f	or the: DISTRICT OF H	AWAII
Case number (if known)			

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

fill in the infor	mation below.			
Identify the cr	editor and the property that is collateral		nat do you intend to do with the operty that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name:	Hawaiian Tel Fcu		Surrender the property. Retain the property and redeem it.	□ No □ Yes
Description of property securing debt:	miles), valued pe	◩	Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Debtor will continue making pay reaffirming.	yments to creditor without

For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D),

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

Debtor	1 <mark>Joni</mark>	Akiko Konishi	Matsuzaki	Case number (if known)
	First Name	Middle Name	Last Name	
Part	3: Sign Below	v		
		y, I declare that I have inc s subject to an unexpire	•	out any property of my estate that secures a debt and
pers		s subject to an unexpire	•	out any property of my estate that secures a debt and
pers	sonal property that is	s subject to an unexpire	•	

UNITED STATES BANKRUPTCY COURT DISTRICT OF HAWAII HONOLULU DIVISION

IN RE: Joni Akiko Konishi Matsuzaki CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

Tł knowled	•	attached l	ist of creditors is true and correct to the best of his/her
Date <u>12/</u>	/16/2016		/s/ Joni Akiko Konishi Matsuzaki Joni Akiko Konishi Matsuzaki
Doto		Cianatura	

American Savings Bank Po Box 2300 Honolulu , HI 96804

Bank Of America Po Box 982238 El Paso , TX 79998

Barclays Bank Delaware Po Box 8803 Wilmington , DE 19899

Citibank Po Box 6497 Sioux Falls , SD 57117

Discover Financial Services Po Box 15316 Wilmington , DE 19850

First Hawaiian Bank Po Box 3200 Honolulu , HI 96847

Hawaii State Federal Cu 560 Halekauwila Street Honolulu , HI 96813

Hawaiian Tel Fcu 1138 N King St Honolulu , HI 96817

Kathryn E. Young - Attorney PO Box 1757 Honolulu, HI 96806-1757 Medcah Inc 320 Ulunui St Ste 5 Kailua , HI 96734

Navient Po Box 9500 Wilkes Barre , PA 18773

Norman S. Matsuzaki 1601 Lusitana Street Honolulu, HI 96813

Sync/sams Club Dc Po Box 965005 Orlando , FL 32896

The Radiology Group Inc 941 Kamehameha Hwy, Suite 208 Pearl City, Hawaii 96782